



OBLON, FISHER, SPIVAK,
MC CLELLAND & MAIER
CRYSTAL SQUARE FIVE-SUITE 400
1755 SOUTH JEFFERSON DAVIS HIGHWAY
ARLINGTON, VA 22202

2A. The COMMISSIONER OF PATENTS AND TRADE-MARKS is requested to apply the Issue Fee to the application identified below.

(Signature of party in interest of record)

Marvin J. Spivak 24,913

(Date)

4/27/87

Note: The Issue Fee will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the Patent and Trademark Office.

SC/SERIAL NO.	FILING DATE	TOTAL CLAIMS	EXAMINER AND GROUP ART UNIT	DATE MAILED
06/930,993	11/14/86	005	BUDD, M	212 02/09/87
First Named Applicant	ISHIYAMA, KAZUFUMI			

TITLE OF INVENTION
CURVILINEAR ARRAY OF ULTRASONIC TRANSDUCERS

ATTY'S DOCKET NO.	CLASS-SUBCLASS	BATCH NO.	APPLN. TYPE	SMALL ENTITY	FEE DUE	DATE DUE
39-1517-2FWC	310-334.000	V46	UTILITY	NO	\$560.00	05/11/87

1A. Further correspondence to be mailed to the following:

2B. For printing on the patent front page, list the names of not more than 3 registered patent attorneys or agents OR, alternatively, the name of a firm having as a member a registered attorney or agent. If no name is listed, no name will be printed.

OBLON, FISHER,
SPIVAK, MCCLELLAND,
2
& MAIER, P.C.
3

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3. ASSIGNMENT DATA (print or type)

- A. (1) ☐ This application is NOT assigned.
(2) ☐ Assignment previously submitted to the Patent and Trademark Office.
(3) ☒ Assignment submitted herewith.

B. For Printing On The Patent: (Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data below is only appropriate when an assignment has been previously submitted to the PTO or is submitted herewith. Completion of this form is NOT a substitute for filing of an assignment as required by 37 C.F.R. 1.334).

(1) NAME OF ASSIGNEE:
KABUSHIKI KAISHA TOSHIBA

(2) ADDRESS: (City & State or Country)
Kawasaki-shi, JAPAN

(3) STATE OF INCORPORATION, IF ASSIGNEE IS A CORPORATION:
JAPAN

4. The following fees are enclosed:

☒ Issue fee ☒ Advanced order ☒ Assignment recording

The following fees should be charged to deposit acc. no. 15-0030

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INVENTOR(S) ADDRESS CHANGE | SC/SERIAL NO.

INVENTOR'S NAME

Street Address

City, State and ZIP Code

CO-INVENTOR'S NAME

Street Address

City, State and ZIP Code

☐ Check if additional changes are on reverse side.

MAILING INSTRUCTIONS

All further correspondence including the Issue Fee Receipt the Patent, and advanced orders will be mailed to the addressee entered in section 1 on PTOL-85c, unless you direct otherwise by specifying the appropriate name and address in 1A below.
(Note: See box 5 below for correspondence concerning maintenance fee payments.)

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Marvin J. Spivak 24 913 4/22/87

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06/930,993	11/14/86	005	BUDD, M	212 02/09/87

First Named Applicant: ISHIYAMA, KAZUFUMI

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3

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060	05/01/87	930993	1 501	15.00 CK
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